June 16, 2004	Exhibit 10	FCIC-Appendix III				
(POLICY RECORD - TYPE 10)						
Format/Edits						

Field	Field Name	Begin	Size	Picture	Field Edits
No.		Pos.			
1	Record Type	1	2	9(02)	Required. Must be 10.
2*	Approved Insurance Provider	3	2	X(02)	Required. Edit with RO AIP /Company table.
3 *	Location State	5	2	9(02)	Required. Edit with FIPS State table.
4	Policy Issuing Company	7	3	9(03)	Required. Edit with company table. Must be valid Pic code for reinsurance year.
5 *	Policy Number	10	7	9(07)	Required. Must be > zeros.
6*	Crop Year	17	4	9(04)	Required. Must be the crop year of the cro reported under the policy. This will equal t Reinsurance Year or Reinsurance Year +/- for the applicable crop code.
7	Type 10 Key Reserve	21	55	X(55)	Space Reserved for Additional key data required in the future or for other record types.
8	Record Number	76	3	9(03)	Required. Must be > zero. Only one recornumber "001" is permitted. Record numbe 002-999 are used to report SBI entities.
9	Branch Office	79	2	X(02)	Required Reinsured organization branch office for Record 001. Record 002 or great must be spaces.
10*	Id Type	81	1	9(01)	Required; must be one of the following: 1 = SSN, 2 = EIN,
					3 = Other, 4 = EIN Applied For, 5 = BIA Number. If Id Type = 4, no Type 11, 13 or 19 record will be accepted until a valid EIN number i reported.
11*	Id Number	82	9	9(09)	 (See Exhibit 10-1 for valid combinations) Required; must be one of the following: 1 Social Security Number 2 EIN Number (Numeric, > zero) 3 All Nines 4 All Zeros 5 A valid Bureau of Indian Affairs No. (See Exhibit 10-1 for valid combinations)

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Field No.	Field Name	Begin Pos.	Size	Picture	Field Edits
12*	Entity Type	91	1	X(01)	Required; Must be one of the following: I = Individual- Only "L" SBI Records C = Corporation K = Corporation without SBI E = Religious, Charitable, Educational, Associations, Clubs, or Other Tax- Exempt Organizations – No SBI records allowed G = Public Entities, State or Local Government – No SBI records allowe J = Co-Owner/Joint Operators L = Landlord/Tenant – Only used as SBI M = Tobacco Marketing Card (One Entity a group of people operating under one car Valid for Cat Coverage Only. *** See M 8 Exhibit 32 N=Enterprise P = Partnership Q = Partnership with less than 2 SBI's S = Spousal Husband/Wife T = Trusts D = Estates O = Other (Non-US Citizens) B = Bureau of Indian Affairs U = Undivided Interests Valid for Cat
					Coverage Only. (See Exhibit 10-1 for valid combinations)
13	Producer Last Name	92	20	X(20)	Required if field 18 (Bus. Name) is blank. Left Justify. Use for persons names only Any entry requires a minimum of 2 characters. Only one name per field. Alpl with (-), (.), (), ('), (,).
14	Producer First Name	112	10	X(10)	Required if field 13 is not blank. Left Just Use for persons names only. Only one nar per field. For Entity Type of 'J' there can 2 First Names. Alpha with (-), (.), ('),
15	Producer Middle Name	122	10	X(10)	Optional; Left Justify if reported. Alpha w (-), (.), ('), (,). Leave blank if not reported
16	Producer Name Suffix	132	5	X(05)	Optional; Left Justify if reported. The nan suffix of the producer (e.g. SR, JR, II, etc.) Alphabetic except for (-), (.), () () or (,). Otherwise; spaces.

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Field No.	Field Name	Begin Pos.	Size	Picture	Field Edits
1100		1 000		- 1	
17	Producer Title	137	4	X(04)	Optional; Left Justify if reported. The title of the producer (e.g. MR, MRS, DR, etc.). Alphabetic except for (-), (.), (.) or (").
18	Business Name	141	35	X(35)	Otherwise; spaces. Required if field 13 is blank. Left Justify. Use for all Entity Types except individual persons. May contain: alpha, number, (-), (,),(), (^{\cup}), (^{\cup}), (^{\cup}), (^{\cup}), (^{\cup}), (^{\cup}), (^{\cup}).
19	Address Line 1	176	35	X(35)	Required. Left Justify.
20	Address Line 2	211	35	X(35)	Optional. Left Justify. Otherwise; spaces.
21	City	246	35	X(35)	Required; If State code = ZZ enter foreign city and country. Left Justify.
22	Address State	281	2	X(02)	Required; Enter Alpha state abbreviation. If a foreign country, enter ZZ.
23	Zip Code	283	5	9(05)	Required if State NE ZZ; Must be a valid US zip code.
24	Zip Extension	288	4	9(04)	Optional. Otherwise; zero fill.
25	Phone Number	292	10	9(10)	Required. If no phone number enter all fives
26	Employee	302		X(01)	Required. For Record Number 001 must be: C = Insurance Provider Employee E = RMA Employee/FCIC R = Relative of Insurance Provider Employee A = Agency Owner, Agent or Adjuster N = None of the Above Optional for Records 002-999 or blank.
27	Ineligible SBI Flag	303	1	X(01)	For SBI records only. Record number must be equal to or greater than 002. Enter Y if SBI Entity is ineligible and share has been reduced. Otherwise, blank.
28	M-14 Appendix IV Review Flag	304	2	9(02)	Must be zeros.
29	Ineligible SBI Share	306	4	9(01)V9(03)	Required: For SBI records only with an Ineligible SBI Flag of Y. Must be $> 0\%$ and ≤ 1.000 . Record number must be ≥ 002 . Must be zeros if not applicable.
30	USDA Common Customer ID	310	6	X(06)	Reserved.
31	Filler	316	31	X(31)	Must be Spaces.
32	SSN Validation Flag	347	2	X(02)	Internal Use. Will be populated during SSN edit.
33	Filler	349	202	X(202)	Must be Spaces.

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Field No.	Field Name	Begin Pos.	Size	Picture	Field Edits
				- 1	
34	FCIC Control Time	551	4	9(04)	Internal Use. The time the transaction batch file was received. (From when transmission
35	FCIC Control Date	555	8	9(08)	started) HHMM Format. Internal Use. The date the transaction batch file was received. (From when transmission started) MMDDCCYY Format.
36	Reinsurance Year	563	4	9(04)	Internal Use. The Reinsurance Year. CCYY format.
37	Batch Number	567	4	9(04)	Internal Use. The sequential number identifying the file that was submitted by the RO AIP to FCIC/RMA.
38	Transaction Sequence Number	571	8	9(08)	Internal Use. The sequential number assigned to each transaction number processed by DAS after it has been sorted.
39	Transaction Rejected Flag	579	1	X(01)	Internal. Reserved
40	Transaction Source Flag	580	1	X(01)	Internal. Reserved
41	Filler	581	20	X(20)	Internal.

^{*} Data elements that must be accepted to meet timely reporting of an eligible crop insurance contract.

Notes:

A 10 record always requires a T-14 record.

Contract number/Policy consists of RO AIP, Location State, Company, Policy number and Crop year.

If any type 10 record is rejected, then all records for the contract (except the T-09) will be rejected.